

Provider Inspection Summary

For the period 05/01/2003 to 04/30/2006
Residential Care Apartment Complex
CERTIFIED

Facility Information

Facility Name: MAPLECREST MANOR (0010341)

Address: 150 N DOUGLAS ST, RIPON, WI 54971

License Status: REGULAR

Licensed/Certified/Registered 05/09/2003

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History

Survey ID: 0093816 **End Date:** 12/03/2004 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10007062 Served 12/22/2004

Deficiencies Cited

Subject Area

Compliance
Verified

Corrected

Survey ID: 0091126 **End Date:** 05/09/2003 **Type:** INITIAL **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 12/21/2004 SOD #10007062 Appealed: Yes Decision: STIPULATION

Sanctions

SUBMIT POC (SOD APPEAL ONLY)

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